Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Page 1 of 59 Document UNITED STATES BANKRUPTCY COURT Fill in this information to identify your case: NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: MAR 26 2019 Northern District of Illinois Case number (if known): JEFFREY P. ALLSTEADT, CLERK Chapter you are filing under: Chapter 7
Chapter 11 INTAKE 2 Chapter 12 Chapter 13 Check if this is an amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/17 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your government-issued picture identification (for example, First name your driver's license or passport). Middle name Bring your picture identification to your meeting Last name with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., !!, !!!) 2. All other names you have used in the last 8 First name years First name Include your married or Middle name Middle name maiden names. Last name Last name First name First name Middle name

(ITIN)

 Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number Last name

9xx - xx -

Middle name

Last name

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 2 of 59

Debtor 1

Sherily Denie Cosby

Case number (if known)
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	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	☐ I have not used any business names or EfNs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names		
_	Business name	Business name
	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	2336 Gabriel AVE.  Number Street	Number Street
	Apt. # 2	
	Zion IL 60099 City State ZIP Code	City State ZIP Code
	Lake	
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
s. Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 3 of 59

Debtor 1

Shealy Dence Cosby

First Name Middle Name Last Name

Case number (# known)\_\_\_\_

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Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you are choosing to file	Check of for Bank	kruptcy (	(Form 2010)). Also, go to the	see <i>Not</i> e top of p	ice Required by 13 page 1 and check t	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.
	under	Cha					
		☐ Cha	-				
		Cha	ipter 13		, day you make a man ga		
8.	How you will pay the fee	loca you sub	il court rself, yo mitting	: for more details about ho ou may pay with cash, ca	ow you r ishier's (	nay pay. Typical check, or money	neck with the clerk's office in your ally, if you are paying the fee or order. If your attorney is pay with a credit card or check
		☐ I ne App	ed to p	pay the fee in installment on for Individuals to Pay Th	<b>nts</b> . If yo	ou choose this op Fee in Installme	otion, sign and attach the ents (Official Form 103A).
		By li less pay	<b>uest t</b> law, a ju than 1 the fee	that my fee be waived (Y udge may, but is not requ 150% of the official povert	ou may ired to, y line th	request this opti waive your fee, at applies to you nis option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the Application to Haye the
9.	Have you filed for bankruptcy within the last 8 years?	☐ No XÍ Yes.	District	Morthern	When	2015	Case number
			District	ŧ	When	MM / DD / YYYY	Core number
					vv;icii	MM / DD / YYYY	Case number
			District		When	MM / DD / YYYY	Case number
10.	Are any bankruptcy	<b>12</b> K410			WATER LAND		
	cases pending or being filed by a spouse who is	$\square$ Yes.	Debtor				Relationship to you
	not filing this case with you, or by a business partner, or by an affiliate?		District		When	MM/DD/YYYY	Case number, if known
			Debtor				Relationship to you
			District		When	MM / DD / YYYY	Case number, if known
11.	Do you rent your residence?	□ No. Yes.		line 12. our landlord obtained an evic o. Go to line 12.	ction judg	ment against you?	?
			☐ Ye		bout an I	Eviction Judgment	Against You (Form 101A) and file it as

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 4 of 59

Debtor	1	

Sherilan Denice Cosby

Case number (if innown)

<ol><li>Are you a sole proprietor of any full- or part-time business?</li></ol>		Go to Part 4.  Name and location of bu	usiness		
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as		Name of business, if any		·	
a corporation, partnership, or LLC.		Number Street	***************************************		
If you have more than one sole proprietorship, use a separate sheet and attach it			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		The state of the s
to this petition.		City			State ZIP Code
		Check the appropriate b			
		Health Care Busines			
		Single Asset Real Es			
		Stockbroker (as defin			
		Commodity Broker (a	as defined in	11 U.S.C. § 10	1(6))
en e		☐ None of the above			
Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	Ø40. □ No.	the Bankruptcy Code.	pter 11.	NOT a small b	usiness debtor according to the definition in
	- 1cs.	Bankruptcy Code.	i and i am	a smail busine	ss debtor according to the definition in the
art 4: Report if You Own o	r Have	Any Hazardous Prope	erty or Any	Property Th	nat Needs Immediate Attention
. Do you own or have any	<b>≱</b> N₀				
property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	☐ Yes.	What is the hazard?			
		If immediate attention is	needed, why	is it needed?	
property that needs immediate attention?					
property that needs					

Debtor 1

First Name Middle Name Lest Name CC COSOY

Case number (#known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

	ou				

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment /plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	abou
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances,

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	required	to receive a	a briefing	about
cred	it co	uncolina	hecause a	£.	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 6 of 59

Dehtor 1

Sterily Denico Cosby

Case number (if known)\_\_\_\_

P	art 6: Answer These Que	stions for Reporting Purpo	ses	
16.	What kind of debts do you have?	16a. Are your debts prima as "incurred by an individu	rily consumer debts? Consumer de al primarily for a personal, family, or ho	ebts are defined in 11 U.S.C. § 101(8) susehold purpose."
		Yes. Go to line 17.		
		16b. Are your debts prima money for a business or ir	rily business debts? Business debt avestment or through the operation of th	s are debts that you incurred to obtain be business or investment.
		☐ No. Go to line 16c. ☐ Yes. Go to line 17.		
		16c. State the type of debts you	u owe that are not consumer debts or bi	usiness debts.
17.	Are you filing under Chapter 7?	☐ No. I am not filling under C	hapter 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chap administrative expense No Yes	ter 7. Do you estimate that after any exe es are paid that funds will be available t	empt property is excluded and o distribute to unsecured creditors?
18.	How many creditors do	<b>G</b> 2√1-49	<b>1</b> ,000-5,000	25,001-50,000
	you estimate that you owe?	50-99	5,001-10,000	<b>5</b> 0,001-100,000
N. Edwin II	Security in the security of the security is a security of the	☐ 100-199 ☐ 200-999	<b>1</b> 0,001-25,000	☐ More than 100,000
19.	How much do you	\$0-\$50,000	☐ \$1,000,001-\$10 million	□ \$500,000,001-\$1 billion
	estimate your assets to be worth?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million	\$1,000,000,001-\$10 billion
al year rapper	TO THE TAX THE THE THE THE TAX	\$500,001-\$1 million	☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion
	How much do you	<b>50-\$50,000</b>	☐ \$1,000,001-\$10 million	☐ \$500,000,001-\$1 billion
	estimate your liabilities to be?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million	\$1,000,000,001-\$10 billion
		\$500,001-\$500,000	\$50,000,001-\$100 million \$100,000,001-\$500 million	\$10,000,000,001-\$50 billion  More than \$50 billion
Pa	rt 7: Sign Below			— word than too billion
Fo	r you	I have examined this petition, a correct.	nd I declare under penalty of perjury tha	at the information provided is true and
		If I have chosen to file under Chof title 11, United States Code. under Chapter 7.	apter 7, I am aware that I may proceed I understand the relief available under e	, if eligible, under Chapter 7, 11,12, or 13 ach chapter, and I choose to proceed
		If no attorney represents me anthis document, I have obtained	d I did not pay or agree to pay someone and read the notice required by 11 U.S.	who is not an attorney to help me fill out C. § 342(b).
		I request relief in accordance wi	th the chapter of title 11, United States	Code, specified in this petition.
		I understand making a false star with a bankruptcy case can resu 18 U.S.C. §§ 152, 1341, 1519, a	alt in tines up to \$250,000, or imprisonm	g money or property by fraud in connection tent for up to 20 years, or both.
		Signature of Debtor 1	Signatur	ro of Dobtor 2
		10 /00	1 3 1 O	re of Debtor 2
		Executed on US (SD)	Execute	ed on

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 7 of 59

Debtor 1

Sherilyn	Denice Casha
First Name Middle Name	Last Name

Case number (if known)
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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date	
Signature of Attorney for Debtor		MM / DD /YYYY
Printed name		
Firm name	· · · · · · · · · · · · · · · · · · ·	
Number Street		
City		ZIP Code
Contact phone	Email addres	oe.
•	Email address	38
Bar number	State	

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 8 of 59

Debtor 1 Sherily Tenice Cosby

First Name Middle Name Last Name

Case number (# known)\_\_\_\_

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal

isequences?
No
Yes
e you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are ccurate or incomplete, you could be fined or imprisoned?
No
Yes
you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?
Yes. Name of Person
Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

Coby x	
Signature of Debtor 1	Signature of Debtor 2
Date 03 35 20 MM / DI YYYY	Date MM / DD / YYYY
Contact phone	Contact phone
Cell phone (224)406 - 2106	Cell phone
Email address Sherilyncusby gmil.	Email address

# Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 9 of 59

Fill in this information to identify your case:	
Debtor 1 Therity Device (Shy First Name Last Name Last Name	
Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number	☐ Check if this is an
(If known)	amended filing
Summary of Your Assets and Liabilities and Certain S  Be as complete and accurate as possible. If two married people are filing together, both are information. Fill out all of your schedules first; then complete the information on this form. It your original forms, you must fill out a new Summary and check the box at the top of this pa	equally responsible for supplying correct you are filing amended schedules after you file
Part 1: Summarize Your Assets	
	Your assets
	1001 055615
Schedule A/B: Property (Official Form 106A/B)	Value of what you own
· · · · · · · · · · · · · · · · · · ·	Value of what you own
1a. Copy line 55, Total real estate, from Schedule A/B	Value of what you own

1b. Copy line 62, Total personal property, from Schedule A/B.....

Copy your monthly expenses from line 22c of Schedule J

5. Schedule J: Your Expenses (Official Form 106J)

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 10 of 59

Debtor 1

<u> </u>	zrilyn	Desice	Cosba	Case number (#known)
First Name	Middle Name	Last Name		The state of the s
	~ J		• •	

l.	Part 4: Answer These Questions for Administrative and St	atistical Records
6.	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?	
	No. You have nothing to report on this part of the form. Check this Yes	box and submit this form to the court with your other schedules.
7.	7. What kind of debt do you have?	
	Your debts are primarily consumer debts. Consumer debts are family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9	those "incurred by an individual primarily for a personal, g for statistical purposes. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing this form to the court with your other schedules.	to report on this part of the form. Check this box and submit
8,	<ol> <li>From the Statement of Your Current Monthly Income: Copy your to Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line</li> </ol>	tal current monthly income from Official 14.
9.	9. Copy the following special categories of claims from Part 4, line 6	of Schedule E/F:
		Total claim
	From Part 4 on Schedule E/F, copy the following:	
	9a. Domestic support obligations (Copy line 6a.)	\$
	9b. Taxes and certain other debts you owe the government. (Copy line	6b.) \$
	9c. Claims for death or personal injury while you were intoxicated. (Cor	y line 6c.) \$
	9d. Student loans. (Copy line 6f.)	\$
	<ol> <li>Obligations arising out of a separation agreement or divorce that yo priority claims. (Copy line 6g.)</li> </ol>	u did not report as \$
	9f. Debts to pension or profit-sharing plans, and other similar debts. (C	opy line 6h.) + \$
	9g. <b>Total.</b> Add lines 9a through 9f.	\$

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 11 of 59

Fill in this in	formation to ide	ntify your case and this	filing:
Debtor 1  Debtor 2 (Spouse, if filing)	First Name	Middle Name  Middle Name	Last Name
United States E	Sankruptcy Court for	the: Northern District of I	llinois
Official	Form 106	A/B	
School	dula A/I	B: Property	\#

amended filing

☐ Check if this is an

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

you own or have any legal or equitable interes	st in any residence, building, land, or similar prop	erty?	
No. Go to Part 2.			
Yes. Where is the property?			
I.1. Street address, if available, or other description	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Śchedule D. ns Secured by Property.
<del></del>	Land	on and property.	portion you own.
	☐ Investment property	\$	<b>3</b>
City State ZIP Code	Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		
	Debtor 1 only	Water de Miller I and a second	
County	Debtor 2 only		
		☐ Check if this is community p	
	Debtor 1 and Debtor 2 only		mmunity property
	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	(see instructions)	mmunity property
	At least one of the debtors and another  Other information you wish to add about this it	(see instructions)	mmunity property
	At least one of the debtors and another	(see instructions)	mmunity property
you own or have more than one, list here:	□ At least one of the debtors and another  Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  □ Single-family home	(see instructions) tem, such as local  Do not deduct secured cla the amount of any secure Creditors Who Have Clain	nims or exemptions. Put d claims on <i>Schedule D</i> ns Secured by Property
you own or have more than one, list here:	At least one of the debtors and another Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home	(see instructions) tem, such as local  Do not deduct secured cla the amount of any secure	nims or exemptions. Put d claims on <i>Schedule D</i> ns Secured by Property
you own or have more than one, list here:	At least one of the debtors and another  Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative	(see instructions) tem, such as local  Do not deduct secured class the amount of any secure Creditors Who Have Clair.  Current value of the	nims or exemptions. Put d claims on <i>Schedule D</i> ns Secured by Property. Current value of the
you own or have more than one, list here:	At least one of the debtors and another Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	(see instructions) tem, such as local  Do not deduct secured class the amount of any secure Creditors Who Have Clair.  Current value of the	nims or exemptions. Put d claims on Schedule D ns Secured by Property  Current value of to portion you own?  \$
you own or have more than one, list here:  1.2.  Street address, if available, or other description	At least one of the debtors and another  Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	(see instructions) tem, such as local  Do not deduct secured clathe amount of any securee Creditors Who Have Clain Current value of the entire property?  \$  Describe the nature of interest (such as fee	nims or exemptions. Put d claims on Schedule E ns Secured by Property  Current value of to portion you own?  \$
you own or have more than one, list here:  1.2.  Street address, if available, or other description	At least one of the debtors and another  Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	(see instructions) tem, such as local  Do not deduct secured clathe amount of any securee Creditors Who Have Clain Current value of the entire property?  \$  Describe the nature of interest (such as fee	aims or exemptions. Purificial designs on Schedule Ens Secured by Property  Current value of to portion you own?  \$
you own or have more than one, list here:  Street address, if available, or other description  City State ZIP Code	At least one of the debtors and another Other information you wish to add about this it property identification number:  What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	(see instructions) tem, such as local  Do not deduct secured clathe amount of any securee Creditors Who Have Clain Current value of the entire property?  \$  Describe the nature of interest (such as fee	aims or exemptions. Purificial designs on Schedule Ens Secured by Property  Current value of to portion you own?  \$
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# Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 12 of 59

1.3. Street address, if available, o	or other description	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	ed claims on Schedule t ms Secured by Propert
		Condominium or cooperative  Manufactured or mobile home	Current value of the entire property?	Current value of portion you own?
***		Manufactured or mobile home Land	\$	\$
		☐ Investment property		¥
City	State ZIP Code	☐ Timeshare	Describe the nature	of your ownership
		☐ Other	interest (such as fee the entireties, or a lif	simple, tenancy by e estate), if known
		Who has an interest in the property? Check one.	VT-CALL-TAX	
County		Debtor 1 only		
County		Debtor 2 only	_	
		Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this ite property identification number:	em, such as local	
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		·		
2: Describe Your Velou own, lease, or have legal own that someone else drives.	<b>hicles</b> or equitable interes	t in any vehicles, whether they are registered or a , also report it on <i>Schedule G: Executory Contracts</i> a	not? Include any vehicles	
ou own, lease, or have legal of the someone else drives. It ars, vans, trucks, tractors, sp	hicles or equitable interes If you lease a vehicle	t in any vehicles, whether they are registered or a , also report it on <i>Schedule G: Executory Contracts</i> a	not? Include any vehicles	Manadan menanda oran oʻra doʻra e taribin ma menan qosado oʻra
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Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 13 of 59

3.3.	Make:			
	Model:	Who has an interest in the property? Check one.  Debtor 1 only	the amount of any secure	aims or exemptions. Put ed claims on <i>Schedule D:</i>
		Debtor 2 only	Creditors Who Have Clai	ms Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			
		Check if this is community property (see instructions)	\$	\$
3.4.	Make:	Who has an interest in the property? Check one.	Do not dod at at annual of	
J.~ <del>.</del> .	<del></del>	Debtor 1 only	Do not deduct secured cl the amount of any secure	d claims on Schedule D.
	Model:	Debtor 2 only	Creditors Who Have Clai	ms Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:	- At least title of the debtors and another		
	Ones anomaton.	Check if this is community property (see instructions)	\$	\$
Exan N Y	nples: Boats, trailers, motors, personal lo es	and other recreational vehicles, other vehicles, and access watercraft, fishing vessels, snowmobiles, motorcycle access Who has an interest in the property? Check one	ories	
Xan D N D Y	<i>nples:</i> Boats, trailers, motors, personal io			d claims on Schedule D: ns Secured by Property.
Exan □ N	nples: Boats, trailers, motors, personal lo les  Make:  Model:  Year:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of th
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Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 14 of 59

Debtor 1

Document Pag

First Name Middle Name Last Name

Case number (# known)

	o you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	No No	
	Yes, Describe	\$
7.	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
2	No No	T PATTERS M. M. Andrey
	Yes. Describe	\$50.00
	Collectibles of the	
8,	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	Yes. Describe	\$
9.	Equipment for sports and hobbies	PT-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	No	northermone and g
	Yes. Describe	\$
10.	Firearms	Management of
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
/	Yes. Describe	\$
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No	
/	Yes. Describe Everyddy Clothes	\$ 100.00
	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	₩ No	<del></del> 1
,	Yes. Describe	\$
	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	No No	a constraints p
	Yes. Describe	\$
4. 4	Any other personal and household items you did not already list, including any health aids you did not list	wanted
	No	
/	Yes. Give specific	
	information	\$
5. /	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	TICACA
1	for Part 3. Write that number here	\$   50 · VO

Case 19-08532

Doc 1 Filed 03/26/19

Entered 03/26/19 09:46:19 Desc Main Page 15 of 59

Debtor 1

Do you own or have any	legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claim or exemptions.
16. Cash	have in your wallet in your ho	me, in a safe deposit box, and on hand when you file	
a.	nave in your waller, in your noi	ne, in a sale deposit box, and on narid when you like	e your petition
No D You			
<b>G</b> res			Sash:\$
17. Deposits of money Examples: Checking, s and other s	savings, or other financial acco similar institutions. If you have n	unts; certificates of deposit; shares in credit unions, i nultiple accounts with the same institution, list each.	brokerage houses,
O, No			
Yes		Institution name:	31¢
	17.1. Checking account:	First Molwest Bank	<u>C                                    </u>
	17.2. Checking account:		\$
	17.3. Savings account:		
	17.4. Savings account:		s
	17.5. Certificates of deposit:		\$
	17.6. Other financial account:		\$
	17.7. Other financial account:		\$
	17.8. Other financial account:		<u> </u>
	17.9. Other financial account:		\$
	or publicly traded stocks investment accounts with brok Institution or issuer name:	erage firms, money market accounts	
			\$
			To be the second of the second
19. Non-publicly traded s an LLC, partnership,		rated and unincorporated businesses, including	an interest in
≥ No	Name of entity:		of ownership:
Yes. Give specific information about		·····	<u>)%</u>
		(	)% <sub>%</sub>
them			

Entered 03/26/19 09:46:19 Desc Main Case 19-08532 Doc 1 Filed 03/26/19 Page 16 of 59 Document Case number (if known) Debtor 1 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. **∕**No Issuer name: Yes. Give specific information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans DACNO. Yes. List each Institution name: account separately. Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others X No ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: \_ Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **X** No Issuer name and description:

Page 17 of 59 Case number (if kno 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). **⊠**-No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit X No Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements Z NO ☐ Yes. Give specific information about them. \$ 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses **≱**No Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. ..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else M No Yes. Give specific information......

Case 19-08532

Doc 1

Filed 03/26/19

Entered 03/26/19 09:46:19

Desc Main

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Page 18 of 59 Debtor 1 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value.... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. XY No Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue **M**No Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims **⊠** No Yes. Describe each claim..... 35. Any financial assets you did not already list Yes. Give specific information...... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned Yes. Describe.... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, moderns, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices **TX**No Yes. Describe...

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Page 19 of 59 Case number (if known) 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ No Yes. Describe .... 41. Inventory ☐ No Yes. Describe.... 42. Interests in partnerships or joint ventures ☐ No Yes. Describe...... Name of entity: % of ownership: % 43. Customer lists, mailing lists, or other compilations Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ No Yes. Describe...... \$\_ 44. Any business-related property you did not already list ☐ No ☐ Yes. Give specific information ...... 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ☐ No ☐ Yes.....

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19  CDocument Page 20 of 59  Case number (# known)  Case number (# known)	Desc Main
48. Crops—either growing or harvested	
□ No	MAN WASHINGTON STITLING
Yes. Give specific information	
	<b>\$</b>
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No	
☐ Yes	And Andrews (Andrews Andrews A
	\$
50. Farm and fishing supplies, chemicals, and feed	
☐ No ☐ Yes	малитилациинци
Tes	\$
51. Any farm- and commercial fishing-related property you did not already list	
No	
Yes. Give specific information,	
	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	<b>\$</b>
	and white the second
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Abo	
Describe An Property For Own of have an interest in That You Did Not List Abo	ove
53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership	
No	· · · · · · · · · · · · · · · · · · ·
Yes. Give specific	\$
information	\$
	\$
54. Add the dollar value of all of your entries from Part 7. Write that number here	<b>→</b> \$
Service of the control of the contro	the control of the state of the
Part 8: List the Totals of Each Part of this Form	
55. Part 1: Total real estate, line 2	→ \$
56. Part 2: Total vehicles, line 5	
57. Part 3: Total personal and household items, line 15 \$ \( \sum_{10} \)	
58. Part 4: Total financial assets, line 36	
59. Part 5: Total business-related property, line 45	
60. Part 6: Total farm- and fishing-related property, line 52	
61. Part 7: Total other property not listed, line 54 +\$	
62. <b>Total personal property</b> . Add lines 56 through 61	al → +876,688.07
63. Total of all property on Schedule A/B. Add line 55 + line 62	s 76,688.09

Schedule A/B: Property

page **10** 

Official Form 106A/B

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 21 of 59

Fill in this information to ide	entify your case:	
Debtor 1 Siest Name	y Dence	CoSby Last Name
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name
United States Bankruptcy Court fo	or the: Northern District of Il	linois
Case number (If known)		·····

☐ Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

<ul> <li>Which set of exemptions are you claiming?</li> <li>☐ You are claiming state and federal nonbank</li> <li>☐ You are claiming federal exemptions. 11 U</li> </ul>	kruptcy exemptions. 11		
. For any property you list on Schedule A/B tl	hat you claim as exem	pt, fill in the information below.	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	\$	<b>D</b> s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<u> </u>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
3. Are you claiming a homestead exemption o			
(Subject to adjustment on 4/01/19 and every 3	years after that for case	es filed on or after the date of adjustment.	)

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 22 of 59

Debtor	1
--------	---

First Name	Middle Name	Last Name	Case number (if known)
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Brief description of the property and i on Schedule A/B that lists this proper	ine Current value of the ty portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$		
Line from Schedule A/B:	·	☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	***************************************
Brief description:		<b>□</b> \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>\_</b> \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>□</b> \$	
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>O</b> \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>□</b> \$	•
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>\$</b>	The second secon
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>Q</b> s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	<b>\$</b>	<b>u</b> s	
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>□</b> \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 23 of 59

Debtor 1  Debtor 2  (Spouse, if filling)  United States Bankruptcy Court for the:  Northern  Case number  (If known)	me Last Name		Check i	f this is an
L+ +-+- ++++			amende	ed filing
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Secure	ed by Prop	erty	12/15
information. If more space is needed, copy additional pages, write your name and cas  1. Do any creditors have claims secured by	,	and attach it to this	form. On the top of	
for each claim. If more than one creditor ha	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street  City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	-		
community debt	hand diddle af an anni anni an			
Date debt was incurred  2.2	Last 4 digits of account number  Describe the property that secures the claim:	\$	tornita emaneriales primotroperantescono enteres su asucciolo associativas de estadores. S	\$
Creditor's Name		]		
Number Street  City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.	•		
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan)  Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number	e na jeunominina od nastava na visto do kratina kontrata niza kinamaten za kra	E- and commence which the proposition of the commence of the c	Mannatura of Philosophy Matter and Sept.
Add the dollar value of your entries in 0	Column A on this page. Write that number here:	\$		

# Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 24 of 59

Debtor 1 First Name Middle Name	Last Name Case nu	mber (if known)	· · · · · · · · · · · · · · · · · · ·	···	
Part 1: Additional Page After listing any entries on this by 2.4, and so forth.	any entries on this page, number them beginning with 2.3, followed		Column A Column B  Amount of claim Value of collateral Do not deduct the value of collateral claim		
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$	
Gradio Grania					
Number Street					
	As of the date you file, the claim is: Check all that apply.				
City State ZIP Code	☐ Contingent ☐ Unliquidated				
Miles and the state of	☐ Disputed				
Who owes the debt? Check one.  Debtor 1 only	Nature of lien. Check all that apply.				
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)				
At least one of the debtors and another	Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	-			
community debt					
Date debt was incurred	Last 4 digits of account number				
	Describe the property that secures the claim:	\$	S	***************************************	
Creditor's Name		·	_ • <u>.                                    </u>	\$	
Number Street					
	As of the date you file, the claim is: Check all that apply.				
	Contingent				
City State 7/P Code	☐ Unliquidated				
- Outo En Odde	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured				
Debtor 1 and Debtor 2 only	car loan)				
At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)				
community debt					
Date debt was incurred	Last 4 digits of account number				
Creditor's Name	Describe the property that secures the claim:	5	\$		
Oledioi S Name				****	
Number Street					
	As of the date you file, the claim is: Check all that apply.  Contingent				
City State ZIP Code	Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortgage or secured				
Deptor 2 only	car loan)			271 181 181 181	
_	☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit				
	Other (including a right to offset)				
☐ Check if this claim relates to a community debt				**************************************	
Date debt was incurred	Last 4 digits of account number				
	n Column A on this page. Write that number here:				
	dd the dollar value totals from all pages.			Altegers of the same	

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 25 of 59

Debtor 1 Case number (if known)\_ First Name List Others to Be Notified for a Debt That You Already Listed Part 2: Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? \_\_\_\_ Last 4 digits of account number \_\_\_ \_\_ \_\_ Name Number Street State ZIP Code City On which line in Part 1 did you enter the creditor? \_\_ Last 4 digits of account number \_\_\_ \_\_ \_\_ Name Number Street ZIP Code City State On which line in Part 1 did you enter the creditor? Last 4 digits of account number \_\_\_\_ \_\_\_ Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? \_\_\_\_ Name Last 4 digits of account number \_\_\_\_\_\_ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? \_\_\_\_ Last 4 digits of account number \_\_\_ \_\_ \_\_ Name Number City State ZIP Code On which line in Part 1 did you enter the creditor? \_\_\_\_ Last 4 digits of account number \_\_\_\_ \_\_\_ Name Number ZIP Code City State

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main

Document Page 26 of 59

Fill in this information to identif	y your case:		
Debtor 1 First Name	Middle Name	E Cosby	
Debtor 2			
(Spouse, if filing) First Name	Middle Name	Last Name	
United States Bankruptcy Court for the	: Northern District of	Illinois	
Case number (If known)			Check if this is amended filing

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pa	t 1: List All of Your PRIORITY Unsecure	ed Claims			
1.	Do any creditors have priority unsecured claims	against you?			
	☐ No. Go to Part 2.				
	☐ Yes.				
2.	List all of your priority unsecured claims. If a cree each claim listed, identify what type of claim it is. If a nonpriority amounts. As much as possible, list the control of the control	editor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the a claim has both priority and nonpriority amounts, list the laims in alphabetical order according to the creditor's near 1. If more than one creditor holds a particular claim instructions for this form in the instruction booklet.)	at claim here a	nd show both	priority and wo priority rt 3.
2.1	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Number Street	When was the debt incurred?			
***************************************	City State ZIP Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed	·.		
-	Debtor 1 only	□ Disputed			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
ļ	Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
	At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Claims for death or personal injury while you were intoxicated			
	No	Other. Specify			
	Yes				
2.2				W TAKAT KERWASAN NI PENJUNIAN PENJUN	
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	_ \$
1		When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply			
		Contingent	•		
	City State ZIP Code	Unliquidated			
,	,	Disputed			
	Who incurred the debt? Check one.  Debtor 1 only	— Disputed			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
j	Debtor 1 and Debtor 2 only	Domestic support obligations			
1	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset?	Other. Specify			
	Yes	man ny strenoù en gant de la desta annu ann de maga e desta ann a tann de material properties de la desta de d			

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 27 of 59

Case number (if known)\_

Debtor 1

First Name	Middle Name	Last Mama	

Part 1: Your PRIORITY Unsecured Clain	ns — Continuation Page		
After listing any entries on this page, number the	m beginning with 2.3, followed by 2.4, and so forth.	Total claim Priority amount	Nonpriority amount
Priority Creditor's Name	Last 4 digits of account number	\$\$_	\$
Рионку Creditor's Name	When was the debt incurred?		
Number Street			
	As of the date you file, the claim is: Check all that apply.		
City State ZIP Code	Contingent		
otale all odds	Unliquidated Disputed		
Who incurred the debt? Check one.  Debtor 1 only			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only	Domestic support obligations		
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were		
Check if this claim is for a community debt	intoxicated		
Is the claim subject to offset?	Other. Specify		
☐ No			
Yes			
The state of the s			Marking of the Control of the Contro
Priority Creditor's Name	Last 4 digits of account number	\$\$	\$
Number Street	When was the debt incurred?		
	As of the date you file, the claim is: Check all that apply.		
	☐ Contingent		
City State ZIP Code	Unliquidated		
Who incurred the debt? Check one.	Disputed		
Debtor 1 only	Type of PRIORITY unsecured claim:		
Debtor 2 only	Domestic support obligations		
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	Taxes and certain other debts you owe the government		
	Claims for death or personal injury while you were		
☐ Check if this claim is for a community debt	intoxicated  Other Specify		
Is the claim subject to offset?			
□ No			
Yes accessorate contract contr		ANTO-THE WAR WITH A CONTROL OF THE C	
Priority Creditor's Name	Last 4 digits of account number	\$\$\$	3
	When was the debt incurred?		· .
Number Street	Without and the de-		=
	As of the date you file, the claim is: Check all that apply.	•	
City State ZIP Code	☐ Contingent☐ Unliquidated		
	Disputed		
Who incurred the debt? Check one.  Debtor 1 only	Tuno of BRIODITY		
Debtor 2 only	Type of PRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only	<ul> <li>Domestic support obligations</li> <li>Taxes and certain other debts you owe the government</li> </ul>		
At least one of the debtors and another	Claims for death or personal injury while you were		1
Check if this claim is for a community debt	intoxicated	Каке выступнент при светь выстранции в странции в пристительный выправлений выстранции пристительный выправления	The data has been as a supplication of the sup
Is the claim subject to offset?	Other. Specify		and the same of th
☐ No			TE PLANTE LA
Yes			

Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Rage 28 of 59 Debtor 1 Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you?  $\square$  No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes ( الموا 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. 🙇 Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts **⊠**∟No Other, Specify TUILION Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one. Unliquidated Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other. Specify D-No Last 4 digits of account number s400.88 When was the debt incurred? As of the date you file, the claim is: Check all that apply. XI Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset?

No 🗀 Yes Debts to pension or profit-sharing plans, and other similar debts

Case 19-08532 Doc 1 Filed 03/26/19  Debtor 1 Pist Name Vidde Name Last Name	Entered 03/26/19 09:46:19 Desc Mair Page 29 of 59	1
Part 2: Your NONPRIORITY Unsecured Claims — Continuat	ion Page	
After listing any entries on this page, number them beginning with 4.4	4, followed by 4.5, and so forth.	Total claim
MouthShore University HealthSystem	-510	\$ 126.04
Billing Dept. 23056 Network Place	When was the debt incurred?	
Chicago Illinois 60673-1230	As of the date you file, the claim is: Check all that apply.  Contingent	
Who incurred the debt? Check one.  Debtor 1 only	Unliquidated Disputed	0.00
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans	
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	u
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	1
Is the claim subject to offset?	Other. Specify Medical Bill	
Yes		
4.5 XF374	Last 4 digits of account number $3662$	\$615.CC
Nonpriority Creditor's Name P.D.: Proceedings of the Procedings of th	When was the debt incurred? 03119	
Number Street DA SH NIM AND	As of the date you file, the claim is: Check all that apply.	1
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify	
₩ <sub>0</sub>	Outer. Specify	:
☐ Yes	The contract of the state of the contract of t	
Synchrony Bank	Last 4 digits of account number 1989	5648.0C
Nonpriority Creditor's Name  Po Pox 9150 22  Number Street	When was the debt incurred? 03/19	77-117
orlando, H. 32896-5022	As of the date you file, the claim is: Check all that apply.	
State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one.	Disputed	1
Debtor 1 only	Type of NONPRIORITY unsecured claim:	- A
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit haring plans, and other similar debts	
is the claim subject to offset?	Pother. Specify Cont Card	,
Q Yes		;

Page 30 of 59 Document Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Last 4 digits of account number 6 1 0 s 1270.9 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts
Other. Specify Is the claim subject to offset? D No Last 4 digits of account number 8126:550.00 When was the debt incurred? 03.19 As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify **⊠**CN∘ Yes s694.00 Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit tharing plans, and other similar debts Other. Specify TUTTION Is the claim subject to offset? ZÍ No Yes Yes

Case 19-08532

Doc 1

Filed 03/26/19

Entered 03/26/19 09:46:19

19 Entered 03/26/19 09:46:19 Page 31 of 59

Desc Main

Debtor 1

Middle Name

Last Name

Case number (if known)\_

### Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

# Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- Other. Add all other priority unsecured claims.
   Write that amount here.
- 6e. Total. Add lines 6a through 6d.

## Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

#### Total claim

- 6a. s
- 6b. ( )
- 6c. s
- 6d. +s
- 6e. \$

#### Total claim

- 6f. s 70,000
- 6g. \$\_\_\_\_\_
- 6h. s
- 6i. + <sub>\$</sub>
- 6j. 76997.04

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 32 of 59

Fil	II in this i	nformation to ider	ntify your case:			
De	ebtor ,	Sherly First Name	n Denice	2 Cosby		
	btor 2 ouse If filing)	First Name	Middle Name	Last Name	·	
Un	ited States	Bankruptcy Court for	the: Northern District	of Illinois		
	se number known)					Check if this is an amended filing
~ .						· ·
		Form 106G	****		• • • • • • •	
					d Unexpired Leases	12/15
info	rmation.	lf more space is n	s possible. If two ma eeded, copy the add Ime and case number	litional page, fill it out, n	ogether, both are equally responsible for supports of the entries, and attach it to this page. (	olying correct On the top of any
	<b>∑</b> No. ¢	heck this box and		court with your other sche	edules. You have nothing else to report on this for re listed on <i>Schedule A/B: Property</i> (Official Form	
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# Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 33 of 59

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Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 34 of 59

Fill in this information to ide	ntify your case:		
Debtor 1 Share Specification of the Debtor 1 Share Specification o	Denice Middle Name	Cosby	
Debtor 2			
(Spouse, if filing) First Name	Middle Name	Last Name	Prost
United States Bankruptcy Court for	the: Northern District of III	inols	
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106H

#### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

Do you have any cod	lebtors? (If you are filing a joint case,	do not list either spouse as a code	ebtor.)
Yes			
Within the last 8 yea Arizona, California, Id Ճ- No. Go to line 3.	aho, Louisiana, Nevada, New Mexico	, Puerto Rico, Texas, Washington,	nunity property states and territories include and Wisconsin.)
	use, former spouse, or legal equivaler	nt live with you at the time?	
☐ No☐ Yes. In which	community state or territory did you liv	re? Fill in t	he name and current address of that person.
Name of your spo	use, former spouse, or legal equivalent	PAPPA AND The fact of the second of the seco	
Number S	treet		
City	State	ZIP Code	
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# Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 35 of 59

ebtor 1 First Name Middle Name	Last Name	·····	Case number (if known)
Additional Page to Lis	t More Codebtors		
Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
			Check all schedules that apply:
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Official Form 106H Schedule H: Your Codebtors page \_\_\_ of \_\_\_

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 36 of 59

Fill in this information to identify	your case:				
Debtor 1 Shorilyn	Denice Co	SSb4			
Debtor 2 (Spouse, if filing) First Name	Middle Name	ast Name			
United States Bankruptcy Court for the:		ast name			
Case number			Check if th	nis is:	
(If known)				ended filing	
				element showing postp as of the following da	
Official Form 106l			MM / D	D / YYYY	
Schedule I: You	ır İncome				12/15
Be as complete and accurate as posupplying correct information. If you follow the separated and your spouseparate sheet to this form. On the Part 1: Describe Employm	ou are married and not filing ise is not filing with you, do top of any additional page	g jointly, and your o not include inform	spouse is living with y nation about your spo	ou, include information use. If more space is ne	about your spouse. eded, attach a
Fill in your employment information.		Debtor 1		Debtor 2 or non-fill	ng spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed	egeneg geographic design eigen dersychet is Silvande Loudellik von der Affektiel der Pill Schales (Stock	☐ Employed ☐ Not employed	akticulus viita kasta ka kanta ka keelee ya viitta kaasa oo soo saa ka k
Include part-time, seasonal, or self-employed work.		,			
Occupation may include student or homemaker, if it applies.	Occupation				
	Employer's name			<del></del>	
	Employer's address	Number Street		Number Street	
		City S	state ZIP Code	City	State ZIP Code
	How long employed there	?			
Part 2: Give Details About	Monthly Income				
Estimate monthly income as of spouse unless you are separated If you or your non-filing spouse habelow. If you need more space, as	ave more than one employer,	, combine the inform	, ,	•	
	-		For Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sale deductions). If not paid monthly,			4450-4440-4440-4444-444-444-444-444-444-	**************************************	
3. Estimate and list monthly over	time pay.	3	3. +\$ <u> </u>	+ \$	
4. Calculate gross income. Add li	ne 2 + line 3.	4	ş_ <u>C</u>	\$	

Official Form 1061 Schedule I: Your Income page 1

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 37 of 59

Debtor 1

First Name Middle Name	Denice Last Name	Cosby	Case number (if known)	***************************************
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Include allimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify:  9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.  9. \$\frac{1}{2}\$	8b. Interest and dividends	8b.	\$	\$	
settlement, and properly settlement.  8c.		nt			
8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8g. \$ \$ \$  8h. Other monthly income. Specify:  8h. +\$ \$  9. \$  Calculate monthly income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  9. \$  Specify:  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. + \$ \$  Combined monthly income.  Write that amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  12. Combined monthly income	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	<u>\$\(\lambda\)</u>	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify:  9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  9. \$48	8d. Unemployment compensation	8d.	\$ <u> </u>	\$	
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify:  9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. + \$  Combined monthly income.  Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  12. Combined monthly income	8e. Social Security	8e.	800.00	\$	
that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify:  9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. + \$ O  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, If it applies  12. Combined monthly income  13. Do you expect an increase or decrease within the year after you file this form?	• • • • • • • • • • • • • • • • • • • •	ce			
Specify:	that you receive, such as food stamps (benefits under the Supplemental		<b>-</b>		
8h. Other monthly income. Specify:  9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  9. \$\frac{10. Calculate monthly income.}{10. Calculate monthly income.}\$ Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  10. \$\frac{10. Calculate monthly income.}{10. Calculate monthly income.}\$ Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  10. \$\frac{10. Calculate monthly income.}{10. Calculate monthly income.}\$ Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in \$\frac{10. Cancellate J}{10. Calculate Monthly income.}\$ Include amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the \$\frac{10. Cancellate J}{10. Cancellate Monthly income.}\$ Combined monthly income.  13. Do you expect an increase or decrease within the year after you file this form?		8f.	5 188.60	\$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. + \$  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  12. Combined monthly income	8g. Pension or retirement income	8g.	\$	\$	
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  12. Combined monthly income	8h. Other monthly income. Specify:	8h.	+ \$ <u> </u>	+\$	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  10. \$\frac{10}{2} \to \frac{10}{2} \to \frac{1}{2}	9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	00.88Pe	\$	
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .  Specify:  11. + \$		10.	\$ <u>988.00</u> +	F \$	\$
friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .  Specify:  11. + \$	11. State all other regular contributions to the expenses that you list in Sched	ule J.			
Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  12. Combined monthly income  13. Do you expect an increase or decrease within the year after you file this form?	Include contributions from an unmarried partner, members of your household, you friends or relatives.	our de	ependents, your room	nmates, and other	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  12. Combined monthly income  13. Do you expect an increase or decrease within the year after you file this form?	Do not include any amounts already included in lines 2-10 or amounts that are r	not av	ailable to pay expens	es listed in Schedule J.	
Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  12. Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  13. Do you expect an increase or decrease within the year after you file this form?	Specify:			11. <del>†</del>	\$ <u> </u>
13. Do you expect an increase or decrease within the year after you file this form?  No.					GOO >
13. Do you expect an increase or decrease within the year after you file this form?	Write that amount on the Summary of Your Assets and Liabilities and Certain St	tatistic	cal Information, if it ap	opfies 12.	\$ 486,00
		orm?			monthly income

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 38 of 59

Fill in this information to identify your case:			
Debtor 1 She alex Dance Cash	<u> </u>		
First Name Middle Name Last Name	Check if this	s is:	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	An amer	<del></del>	
United States Bankruptcy Court for the: Northern District of Illinois		ment showing post s as of the following	
Case number			g date.
(if known)	MM / DO	YYYYY	
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are fili information. If more space is needed, attach another sheet to this form (if known). Answer every question.	ing together, both are equally res n. On the top of any additional pa	sponsible for supply ges, write your nam	ing correct e and case number
Part 1: Describe Your Household			
1. Is this a joint case?			
No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?			
☐ No			
Yes. Debtor 2 must file Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?			
Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	Marin Control of the		☐ No ☐ Yes
			□ No
			Yes
	***		☐ No
	100 m		☐ Yes
	**************************************	••••	☐ No
			☐ Yes
		-	□ No □ Yes
Do your expenses include expenses of people other than			165
yourself and your dependents? Yes			
art 24 Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you a	re using this form as a suppleme	ent in a Chanter 13 c	asa ta rapart
expenses as of a date after the bankruptcy is filed. If this is a supplement applicable date.	ental Schedule J, check the box a	at the top of the form	and fill in the
nclude expenses paid for with non-cash government assistance if you			
such assistance and have included it on Schedule I: Your Income (Office	•	Your exper	Ises
<ol> <li>The rental or home ownership expenses for your residence. Include any rent for the ground or lot.</li> </ol>	first mortgage payments and	4. \$ 169	.00.
If not included in line 4:			
4a. Real estate taxes		4a. \$	
4b. Property, homeowner's, or renter's insurance		4b. \$	
4c. Home maintenance, repair, and upkeep expenses		4c. \$	
4d. Homeowner's association or condominium dues		4d. \$	

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 39 of 59

Debtor 1

Sherily Denice Coshy
First Name Middle Name Last Name

Case number (if known)\_\_\_\_

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	<u>\$O</u>
	Utilities:	٥.	
٥.	6a. Electricity, heat, natural gas	6-5	s 258.00
	6b. Water, sewer, garbage collection	6a.	* <u>200.00</u>
	6c. Telephone, cell phone, Internet, satellite, and cable services	6b. 6c.	\$ 200.00
	6d. Other. Specify:	6d.	• 000.00
7.	Food and housekeeping supplies	7,	\$ 300.00
8.	<b></b>	8.	\$ <b>6</b>
9.		9.	\$200.00
10.		10.	\$100.00
11.		11.	s ()
12.			\$ 0
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	12.	• •
14.		13.	\$ ()
	Insurance.	14,	•
13.	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$O
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$O
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$ <u>(</u>
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$()
	17b. Car payments for Vehicle 2	17b.	\$ <u> </u>
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
9,	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.	
	20a. Mortgages on other property	20a.	\$O
	20b. Real estate taxes	20b.	sO
	20c. Property, homeowner's, or renter's insurance	20c.	sO
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$ <u>O</u>

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 40 of 59

Other. Specify:	21. +\$
Calculate your monthly expenses.	
22a. Add lines 4 through 21.	22a. \$ 227.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b. s 6
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. \$ 1227.00
Calculate your monthly net income.	. 989 00
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.
23b. Copy your monthly expenses from line 22c above.	23b\$1227.00
23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.	<sub>230.</sub> \$=\\dagge^2239.80
Do you expect an increase or decrease in your expenses within the year after you file this for example, do you expect to finish paying for your car loan within the year or do you expect you	ıı
mortgage payment to increase or decrease because of a modification to the terms of your mortgage $\Lambda$ .	nge?
<b>5</b> 2 Ho.	

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 41 of 59

Š					
	Fill in this information to identify	your case:	210		
	Debtor 1 First Name	Middle Name Last Name	Check if this is	:	
	Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name	An amende	•	
	United States Bankruptcy Court for the: 1	Northern District of Illinois		ent showing post is of the following	petition chapter 13 and date:
	Case number(If known)		MM / DD / Y		,
	Official Form 106J-2				
		<b>5 0</b>	4 HW R R R R		_
U: D: or ne	se this form for Debtor 2's separa bebtor 2 have one or more dependently with respect to expenses for D	xpenses for Sepa te household expenses ONLY IF De ents in common, list the dependent bebtor 2 that are not reported on Sci s form. On the top of any additional	ebtor 1 and Debtor 2 maintain separ is on both Schedule J and this form hedule J. Be as complete and accu	rate households.  I. Answer the quirate as possible.	If Debtor 1 and estions on this form If more space is
•	art 1: Describe Your Hou	sehold			
1.	Do you and Debtor 1 maintain se	narate households?			
	No. Do not complete this form				
	Yes	131.			
2.	Do you have dependents?	□ No	Dependent's relationship to	Dependent's	Does dependent live
	Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.	Yes. Fill out this information for each dependent	Debtor 2:	аде	with you?
	Do not state the dependents' names.				☐ No ☐ Yes
			****	<del></del>	☐ No ☐ Yes
				<u> </u>	□ No
					Yes
				<del></del>	No Yes
3.	Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	□ No □ Yes			The second second
Pa	ort 2: Estimate Your Ongoin	ng Monthly Expenses	The state of the s		The state of the s
	stimate your expenses as of your openses as of a date after the bank	bankruptcy filing date unless you a	re using this form as a supplement	in a Chapter 13 c	ase to report
lne	clude expenses paid for with non-	cash government assistance if you		Vousevne	
	The rental or home ownership ex	it on Schedule I: Your Income (Office openses for your residence. Include	·	Your expe	
	any rent for the ground or lot.		4	ļ. Ψ <u> </u>	
	If not included in line 4:  4a. Real estate taxes		_	·	
	4b. Property, homeowner's, or re-	nter's insurance			
	4c. Home maintenance, repair, a		4	_	1944 Language Ministration and Control of Co

4d. Homeowner's association or condominium dues

## Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 42 of 59

De	ebtor 1 Case number (i	(known)	
	MUNITARITY		
			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5,	\$
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other, Specify:	6d.	\$
	Food and housekeeping supplies	7.	\$
	Childcare and children's education costs	8.	\$
	Clothing, laundry, and dry cleaning	9.	\$
	Personal care products and services	10.	\$
	Medical and dental expenses	11.	\$
	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
	Charitable contributions and religious donations	14.	\$
	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		, , , , , , , , , , , , , , , , , , , ,
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15đ.	\$
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other, Specify:	17c.	\$
	17d. Other, Specify:	17d.	\$
		18.	\$
	Other payments you make to support others who do not live with you.		T
	Specify:	19,	\$
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inco		
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20b. 20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20a. 20e	\$

Debtor 1

## Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 43 of 59

De	ebtor 1	First Name	Middle Name	Last Name		····	Case number (if knowi	n)	·		
21.	Other. S	Specify:			***************************************	en e	e and the supervision of the contract of the c	21.	+\$	and the second s	
22.	The resu	ilt is the mont	ses. Add lines shiy expenses of otor 1 and Debto	Debtor 2. Copy t	the result to line	e 22b of Schedule	I to calculate the	22.	\$		
23.	Line not u	ised on this fo	orm.								
24.	Do you ex	xpect an inc	rease or decrea	se in your expe	nses within th	e year after you fil	le this form?				
						year or do you exp o the terms of your					
	□ No.					NAMES AND ASSESSED  ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSEDA ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSEDA					
	☐ Yes.	Explain he									Albert 1 miles of the state of

## Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 44 of 59

Debtor 1  First Name  Debtor 2 (Spouse, if filing)  First Name  Middle Name  Last Name  United States Bankruptcy Court for the: Northern District of Illinois  Case number  (If known)	Debtor 1  First Name  Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the: Northern District of Illinois	Fill in this information to ide	ntify your case:		
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: Northern District of Illinois  Case number	Debtor 2 (Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: Northern District of Illinois  Case number (If known)		$\omega u = u + u = u$	c Cosby	
United States Bankruptcy Court for the: Northern District of Illinois  Case number	United States Bankruptcy Court for the: Northern District of Illinois  Case number (If known)	Debtor 2		Last Name	
Case number	Case number (If known)	(Spouse, if filing) First Name	Middle Name	Last Name	
	(If known)	United States Bankruptcy Court for	the: Northern District of I	inois	
				1-ville-vinninger	

### Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
	ı pay or agree to pay someone who is NOT an a	ttorney to help you fill out bankruptcy forms?	
No Yes	. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	
			:
Under p	penalty of perjury, I declare that I have read the s y are true and correct.	summary and schedules filed with this declaration and	
<b>x</b> <	ship of the x	•	
Signatu	re of Debtor 1	Signature of Debtor 2	-
Date M	077,03/24/19	Date	:

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 45 of 59

Fill in this information to identify your case:  Debtor 1	Last Name	9	
United States Bankruptcy Court for the: Northern District of  Case number (If known)			Check if this is an amended filing
Official Form 107 Statement of Financial Affair			
Be as complete and accurate as possible. If two marr information. If more space is needed, attach a separa number (if known). Answer every question.  Part 1: Give Details About Your Marital Sta	ate sheet to this for	m. On the top of any additional pages, write	
1. What is your current marital status?			
Married  Not married			
2. During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3 years. Debtor 1:	-		Dates Debtor 2 lived there
Number Street	From	Same as Debtor 1  Number Street	☐ Same as Debtor 1 From To
City State ZIP Code	hayana karaban da gaya iya sahah har yangangan yakan da asah da saha karaban yangan yakan da saha da saha da s	City State ZIP Code	\$\pi\$ \pi\$ \pi\$ \pi\$ \pi\$ \pi\$ \pi\$ \pi\$
Number Street	From	Same as Debtor 1  Number Street	Same as Debtor 1  From  To
City State ZIP Code	-	City State ZIP Co	
3. Within the last 8 years, did you ever live with a si states and territories include Arizona, California, Ida  No. No. Make sure you fill out Schodule H: Your Co.  You Make sure you fill out Schodule H: Your Co.	ho, Louisiana, Nevad	da, New Mexico, Puerto Rico, Texas, Washingt	tory? (Community property on, and Wisconsin.)
Yes. Make sure you fill out Schedule H: Your Co	CONTRACTOR OF THE CONTRACTOR O		

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 46 of 59

btor 1 Sherilan Denice Cosby

		producina a managamenta a	Nilverinterili Adelmini pietata dell'Ameninterio d'Alfredicci dell'a	
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply,	Gross income (before deductions a exclusions)
From January 1 of current year unt the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$	Wages, commissions, bonuses, tips Operating a business	\$
For last calendar year: (January 1 to December 31,	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For the calendar year before that:	☐ Wages, commissions, bonuses, tips	allinda renomen a human en sustante en sa renomen (res, es e sous resservos anomes con	☐ Wages, commissions, bonuses, tips	distribution of the suppression of the super-supering super-
(January 1 to December 31,	Operating a business		Operating a business	
clude income regardless of whether that nemployment, and other public benefit pa ambling and lottery winnings. If you are fi st each source and the gross income from	nyments; pensions; rental inc ing a joint case and you hav	ome; interest; dividends; e income that you receiv	money collected from laws ed together, list it only once	suits; royalties; and
nemployment, and other public benefit pa ambling and lottery winnings. If you are fi	nyments; pensions; rental inc ing a joint case and you hav	s of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
nemployment, and other public benefit parambling and lottery winnings. If you are first each source and the gross income from	nyments; pensions; rental inc ing a joint case and you hav	s of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
nemployment, and other public benefit parambling and lottery winnings. If you are first each source and the gross income from	nyments; pensions; rental inc ling a joint case and you hav m each source separately. D	s of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once t you listed in line 4.	suits; royalties; and
nemployment, and other public benefit parambling and lottery winnings. If you are first each source and the gross income from No Yes. Fill in the details.	nyments; pensions; rental incling a joint case and you haven each source separately. Debtor 1  Sources of income Describe below.	s of other income are alinome; interest; dividends; e income that you receive onot include income that  Gross income from each source (before deductions and	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions a
nemployment, and other public benefit parambling and lottery winnings. If you are fi st each source and the gross income from  No  Yes. Fill in the details.	nyments; pensions; rental incling a joint case and you haven each source separately. Debtor 1  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions a
nemployment, and other public benefit parambling and lottery winnings. If you are first each source and the gross income from No Yes. Fill in the details.	nyments; pensions; rental incling a joint case and you haven each source separately. Debtor 1  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions a
nemployment, and other public benefit parambling and lottery winnings. If you are first each source and the gross income from No Yes. Fill in the details.	nyments; pensions; rental incling a joint case and you haven each source separately. Debtor 1  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions a
nemployment, and other public benefit parambling and lottery winnings. If you are first each source and the gross income from No Yes. Fill in the details.  From January 1 of current year unit the date you filed for bankruptcy:	pyments; pensions; rental incling a joint case and you haven each source separately. D  Debtor 1  Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions a

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 47 of 59

Debtor 1

Sher	ilyn	Denice	Cosby
First Name	Middle Name	Last Name	

Case number (if known)
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t 3:								
TANKS ME	List Certai	n Payme	nts You	Made Befor	e You Filed	for Bankruptcy		
	h a D h 4 a 4 fr	D-1-4-	Ot	4		L-2		
				ts primarily co				
<b>⊸i</b> No.	"incurred by	an individ	ual primar	ily for a person	ial, family, or h	e <b>bts.</b> Consumer debts and nousehold purpose." ay any creditor a total of	re defined in 11 U.S.C. § 10° f \$6.425* or more?	1(8) as
	☐ No. Go t	-	•					
	tota chii	al amount ; Id support	you paid th and alimo	hat creditor. Do ny. Also, do no	o not include p ot include payn	ayments for domestic sunents to an attorney for	or more payments and the upport obligations, such as this bankruptcy case. after the date of adjustment.	
Yes	s. Debtor 1 or	Debtor 2	or both h	ave primarily	consumer de	bts.		
						ay any creditor a total of	f \$600 or more?	
	No. Go	o line 7.						
	cre	ditor. Do n	not include	payments for	domestic supp	\$600 or more and the to out obligations, such as ey for this bankruptcy ca		
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for.
						\$	<u> </u>	☐ Mortgage
	Creditor:	s Name						
								L. Car
	Number	Street						☐ Car ☐ Credit card
	Number	Street						Credit card
	Number	Street						☐ Credit card☐ Loan repayment
	Number	Street	State	ZIP Code	onentative arrowales to the constant of the co			☐ Credit card☐ Loan repayment
		Street	State	ZiP Code		AN JOHN WELL BUILDING JUNE TO BE TO BE SEED A SEED ASSESSED TO BE SEED ASSESSED.	t romani, samuest klad (1) väljahad till darihadikussakkala (takikkilas (k.), va	☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor
		and the second s	State	ZIP Code		an and an	**************************************	☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other
	City	and the second s	State	ZIP Code		NO SIGNIS E E CONTROL INSTANÇAN E ENERGY ANGERIA CONTROL AGAI		Credit card Loan repayment Suppliers or vendor Other Mortgage Car
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	City  Creditor's	s Name	State	ZIP Code		\$		Credit card Loan repayment Suppliers or vendor Other Mortgage Car
	City  Creditor's	s Name	State	ZIP Code		S	**************************************	Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor
	City  Creditor's	s Name	State	ZIP Code		\$	\$	Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor
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	City  Creditor's  Number  City	Street				\$		Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other  Mortgage Car Credit card Credit card
	City  Creditor's  City  Creditor's	s Name  Street						Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Credit card Loan repayment Credit card Loan repayment Credit card Loan repayment
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Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 48 of 59

siders include your prorations of which pent, including one to the as child support	for a business you operate a and alimony.	ers; relatives of any of ers; person in control, or	general partners; p owner of 20% or r	artnerships of which nore of their voting	tho was an insider? In you are a general partner; In securities; and any managing I domestic support obligations,
Yes. List all paym	ients to an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name			\$	. \$	
Number Street					
City	State ZIP Cod	e			
Insider's Name			\$	\$	
Number Street					
City	State ZIP Coo	la			
n insider? iclude payments on PNo	e you filed for bankruptcy, a debts guaranteed or cosig	ned by an insider.	Total amount paid		n account of a debt that benefited Reason for this payment Include creditor's name
n insider? clude payments on PNo I Yes. List all payn	debts guaranteed or cosig	ned by an insider. der. Dates of	Total amount	Amount you still owe	Reason for this payment
n insider? Include payments on Include payments on Include payments on Insider's Name	debts guaranteed or cosig	ned by an insider.  der.  Dates of payment	Total amount	Amount you still owe	Reason for this payment

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 49 of 59

Debtor	1	

She Middle Nam	Depice Cosby	Case number (if known).
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st all such matters, including personal indicentract disputes.  No Yes. Fill in the details.	injury cases, small clai	arty in any lawsuit, court action, or a ms actions, divorces, collection suits, p	aministrative proce	eding? port or custody modifica
	Nature of the cas	Se Court or agency		Status of the cas
Case title	METALANIAN A	Court Name		Pending  On appeal
Case number		Number Street		☐ Concluded
**************************************	THE STATE OF THE S	City	State ZIP Code	·
Case title		Court Name	1949 Harden and Allendards and Allen	Pending On appeal
Case number	- Approximation of the contract of the contrac	Number Street		Concluded
eck all that apply and fill in the details.  No. Go to line 11.	ruptcy, was any of yo below.	our property repossessed, foreclosed	d, garnished, attach	ed, seized, or levied?
eck all that apply and fill in the details	below.	our property repossessed, foreclosed	d, garnished, attach Date	
eck all that apply and fill in the details.  No. Go to line 11.	below. Descri			
eck all that apply and fill in the details.  No. Go to line 11.	below. Descri	be the property		
eck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.	Descri	be the property		ed, seized, or levied?  Value of the propert
eck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name	Descri	be the property		
eck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name	Descri Explain	be the property  n what happened roperty was repossessed. roperty was foreclosed.		
eck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Descri Explain	be the property  n what happened roperty was repossessed.	Date	
eck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Descri Explain P P P P P	be the property  n what happened  roperty was repossessed.  roperty was foreclosed.  roperty was garnished.	Date	Value of the propert
eck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Descri Explain P P P P P	be the property  n what happened  roperty was repossessed.  roperty was foreclosed.  roperty was garnished.  roperty was attached, seized, or levied	Date	Value of the propert
eck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Descri Explain P P P P P	be the property  n what happened  roperty was repossessed.  roperty was foreclosed.  roperty was garnished.  roperty was attached, seized, or levied	Date	Value of the propert  \$  Value of the proper
eck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State 2	Descri  Explain  P P P P P P Descrii	he the property  h what happened  roperty was repossessed.  roperty was foreclosed.  roperty was garnished.  roperty was attached, seized, or levied be the property	Date	Value of the propert  \$  Value of the proper
eck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State 2	Explain  P P P P P Pescrii	be the property  n what happened  roperty was repossessed.  roperty was foreclosed.  roperty was garnished.  roperty was attached, seized, or levied	Date	Value of the proper  \$  Value of the prope

Property was garnished.

Property was attached, seized, or levied.

State ZIP Code

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 50 of 59

aim no dans bafaar	A		
nin 90 days before you filed for bankrup ounts or refuse to make a payment beca	tcy, did any creditor, including a bank or fi	nancial institution, set off any ar	mounts from yo
No	and you only a done:		
Yes. Fill in the details.			
	Describe the action the creditor took	Date action	Amount
reditor's Name		was taken	
lumber Street			\$
ity State ZIP Code	Last 4 digits of account number: XXXX		
in a year before you filed for bankrupto	y, was any of your property in the possess	ion of an assignee for the benef	it of
itors, a court-appointed receiver, a cus	todian, or another official?		
lo			
es es			
	_		
List Certain Gifts and Contribut	ions		
n 2 years before you filed for bankrupt lo es. Fill in the details for each gift.	cy, did you give any gifts with a total value	of more than \$600 per person?	
io 'es. Fill in the details for each gift.  Gifts with a total value of more than \$600	cy, did you give any gifts with a total value  Describe the gifts	Dates you gave	Value
lo es. Fill in the details for each gift.			Value
io 'es. Fill in the details for each gift.  Gifts with a total value of more than \$600		Dates you gave	Value
lo les. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Dates you gave	Value \$
lo les. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		Dates you gave	Value \$
o es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person		Dates you gave	Value \$ \$
lo es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift		Dates you gave	Value \$ \$
es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift		Dates you gave	Value \$ \$
es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift		Dates you gave	Value \$ \$
es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift		Dates you gave	Value \$\$
es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift  umber Street		Dates you gave	Value \$\$
es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift  umber Street		Dates you gave	Value \$ \$
es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift  ty State ZIP Code  erson's relationship to you		Dates you gave the gifts	\$\$
es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift  ty State ZIP Code  erson's relationship to you  ifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts  Dates you gave	Value \$ \$
es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift  ty State ZIP Code  erson's relationship to you  ifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts  Dates you gave	\$\$
es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift  ty State ZIP Code  erson's relationship to you  ifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts  Dates you gave	\$\$
es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts  Dates you gave	\$\$ \$Value
do es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift  umber Street  ty State ZIP Code erson's relationship to you  ifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts  Dates you gave	\$\$ \$Value
es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift  ty State ZIP Code  erson's relationship to you  ifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts  Dates you gave	\$\$ \$Value

Person's relationship to you

Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed Date you Value that total more than \$600 contributed Charity's Name Number Street City ZIP Code Part 6: **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? X No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was Person Who Was Paid made Number Street ZIP Code Email or website address Person Who Made the Payment, if Not You

Case 19-08532

Doc 1

Filed 03/26/19

Document

Entered 03/26/19 09:46:19

Page 51 of 59

Desc Main

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main

Page 52 of 59 Document Debtor 1 Case number (if known Description and value of any property transferred Date payment or Amount of transfer was made payment Person Who Was Paid Number Street ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Number Street State ZIP Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. D-No Yes. Fill in the details. Description and value of property Describe any property or payments received Date transfer transferred or debts paid in exchange was made

Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you Person Who Received Transfer Number Street State ZiP Code Person's relationship to you

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 53 of 59

Debtor 1

She	ilun	Denice	Cosbu
First Name	Middle Name	Last Name	

Case number (if known)
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FNo	onen called asse	et-protection devices.)			
Yes. Fill in the details.					
	, mare	Description and value of the prope	rty transferred		Date transfer was made
Name of trust					
			er kalenn kill all kalen om kalennammen sek om men sek i sind som hed e mekkel	NOTATION AND ADDRESS OF THE OWNER OWNER OF THE OWNER OW	
8: List Certain Financi	al Accounts,	Instruments, Safe Deposit	Boxes, and Storag	e Units	
		, were any financial accounts o	or instruments held in	your name, or for your	benefit,
osed, sold, moved, or transf					
		r other financial accounts; certi		res in banks, credit un	ions,
-	ınds, cooperati	ves, associations, and other fir	nancial institutions.		
No					
Yes. Fill in the details.					
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance befo closing or transfe
Name of Financial Institution		xxxx	☐ Checking	VINEAU TO DO THE DO THE OF THE OWNER, WHICH A REAL PROPERTY OF THE OWNER, WHICH A REAL PROPERTY OF THE OWNER,	\$
Number Street			☐ Savings		
			Money market		
W-43-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-			☐ Brokerage		
City State	ZIP Code		=		
er minnessen i er	en e	obii: Mobiliiiiiii 9-70 oo dalaiii Moliiiiiiiii maiith maiith obordoisii who mbiinh ab i homba comana an ama a	Other_	entropy is a transmitter of the latest the latest of the Control o	The COMPanies COM STOCKS IN A STOCK AND A
			m.		
Name of Financial Institution		XXXX	Checking		\$
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Number Street					
Number Street					
Number Street			☐ Brokerage		
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City State			☐ Brokerage ☐ Other		_
City State	have within 1 ye	ear before you filed for bankrup	☐ Brokerage ☐ Other	box or other depository	for
City State  you now have, or did you hourities, cash, or other value	have within 1 ye	∍ar before you filed for bankrup	☐ Brokerage ☐ Other	box or other depository	for
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City State  you now have, or did you hourities, cash, or other values	have within 1 ye	ear before you filed for bankrup Who else had access to it?	☐ Brokerage ☐ Other		
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City State  you now have, or did you he curities, cash, or other value  No  Yes. Fill in the details.	have within 1 ye		Otherotcy, any safe deposit		Do you sti have it? ☐ No
City State  you now have, or did you hourities, cash, or other values	have within 1 ye		Otherotcy, any safe deposit		Do you sti
City State  you now have, or did you he purities, cash, or other value  No  Yes. Fill in the details.	have within 1 ye	Who else had access to it?	Otherotcy, any safe deposit		Do you sti have it? ☐ No
City State  you now have, or did you he curities, cash, or other value  No  Yes. Fill in the details.	have within 1 ye	Who else had access to it?	Otherotcy, any safe deposit		Do you sti have it? ☐ No
City State  you now have, or did you he purities, cash, or other value  No  Yes. Fill in the details.	have within 1 ye	Who else had access to it?	Otherotcy, any safe deposit		Do you sti have it? ☐ No

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 54 of 59

No	age unit or place other than your home within		cy?
Yes. Fill in the details.			
	Who else has or had access to it?	Describe the contents	Do you s have it?
P. P. Control of the			□ No
Name of Storage Facility	Name		☐ Yes
Number Street	Number Street		mander of the second
	CityState ZIP Code		ndeph Hengerave
City State Zi	P Code		4
	u Hold or Control for Someone Else		
	rty that someone else owns? Include any prop	erty you borrowed from, are storing	for,
or hold in trust for someone. ☑∕No			
Yes. Fill in the details.			
	Where is the property?	Describe the property	Value
	, , ,		
Owner's Name	<del></del>		\$
	Number Street		\$
Owner's Name Number Street	Number Street		\$
			\$
Number Street	Number Street  City State ZIP Code	e	\$
Number Street  City State Zi	P Code City State ZIP Cod	e	\$
Number Street  City State Zi  rt 10: Give Details About E	P Code City State ZIP Cod	e	\$
Number Street  City State Zi  City Details About E  the purpose of Part 10, the follow	P Code City State ZIP Code invironmental Information ring definitions apply:		\$
Number Street  City State Zi  City Details About E  the purpose of Part 10, the follow  Environmental law means any fed hazardous or toxic substances, w	P Code  City State ZIP Code  Invironmental Information  ring definitions apply:  deral, state, or local statute or regulation concertates, or material into the air, land, soil, surface	rning pollution, contamination, rele ce water, groundwater, or other med	ases of fium,
Number Street  City State Zi  1: 10: Give Details About E  the purpose of Part 10, the follow  Environmental law means any fed hazardous or toxic substances, wincluding statutes or regulations of Site means any location, facility, or	P Code  City State ZIP Code  Invironmental Information  Ving definitions apply: Iteral, state, or local statute or regulation concestastes, or material into the air, land, soil, surfaceontrolling the cleanup of these substances, wor property as defined under any environmental	rning pollution, contamination, relected water, groundwater, or other medvastes, or material.	dium,
Number Street  City State Zi  The Give Details About E  The purpose of Part 10, the follow  Environmental law means any fed hazardous or toxic substances, wincluding statutes or regulations of the means any location, facility, outilize it or used to own, operate, or	City State ZIP Code  invironmental Information  ring definitions apply: eral, state, or local statute or regulation concerastes, or material into the air, land, soil, surfactontrolling the cleanup of these substances, we preproperty as defined under any environmentator utilize it, including disposal sites.	rning pollution, contamination, relecte water, groundwater, or other medates, or material.	dium, te, or
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Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 55 of 59

Document Page 55

Sherilan Denice Cosha

Case number (# known)

Debtor
CANCOL

T you notified any governmen	ntal unit of any release of hazardous mat		
No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Comments		
Traine of Otto	Governmental unit		<del></del>
Number Street	Number Street		of the section of the second
	City State ZIP Code	<del></del>	
City State	ZIP Code		
	e en la companya de	en e	
e you been a party in any jud	icial or administrative proceeding under	any environmental law? Include settlemen	ts and orders.
Мo			
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the
<b>6</b>			case
Case title	Court Name		Pending
	Codit (Vaite		On appe
	Number Street		11
	Number Street		☐ Conclude
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Give Details About  A sole proprietor or self-e  A member of a limited liak  A partner in a partnership  An officer, director, or ma  An owner of at least 5% or  No. None of the above applies  Yes. Check all that apply above  Business Name  Number Street  City State Z	Your Business or Connections to Appropriate of the profession, or other solidity company (LLC) or limited liability paraging executive of a corporation of the voting or equity securities of a corporation of the voting of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting of the	r have any of the following connections to activity, either full-time or part-time artnership (LLP)  poration  usiness.  Employer Identification Do not include Social S  EIN:  pper	number ecurity number or ITIN.

Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 56 of 59

	Describe the nature of the business	Employer Identification number
Business Name	-	Do not include Social Security number or ITIN
		EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
	•	
City State ZIP Code		From To
estitutions, creditors, or other parties.  No Yes. Fill in the details below.	ptcy, did you give a financial statement to ar Date issued	
No Yes. Fill in the details below.	Date issued	
] No		
No Yes. Fill in the details below.	Date issued	
No Yes. Fill in the details below.	Date issued	
No Yes. Fill in the details below.	Date issued	
No Yes. Fill in the details below.  Name  Number Street	Date issued	

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

Signature of Debtor 1

Signature of Debtor 2

Date \_\_\_\_\_

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

ANO No Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No.

Yes. Name of person\_\_\_\_\_

 $\leq 1$ 

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 57 of 59

Fill in this information to ide	entify your case:			
Debtor 1 Specification of the Property of the	yn Denkee	CoSbis		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	<u> </u>	
United States Bankruptcy Court fo	or the: Northern District of I	llinois		
Case number (If known)				Check if this is a amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the propert as exempt on Schedule C
Creditor's name:	☐ Surrender the property.	☐ No
Description of	Retain the property and redeem it.	Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
Description of	Retain the property and redeem it.	Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☐ No
Teamer - The second of the sec	Retain the property and redeem it.	☐ Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	No
i, a mir vig milja, kum, se mannen ammengangangan, se meri inner inner samannan and i kum seminannan and a series and session and seminannan and seminan	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	

12/15

# Case 19-08532 Doc 1 Filed 03/26/19 Entered 03/26/19 09:46:19 Desc Main Document Page 58 of 59

Describe your unexpired personal property leases	Will the lease be assumed?
essor's name:	□ No
escription of leased roperty:	
essor's name:	□ No
escription of leased roperty:	Yes .
essor's name:	□ No
escription of leased roperty:	Yes
essor's name:	□ No
escription of leased openty;	Yes
essor's name:	□ No
escription of leased roperty;	Yes
essor's name:	□ No
escription of leased operly:	Yes
essor's name:	□ No
escription of leased operty:	Yes
3: Sign Below	

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re: Sherilyn Cosby	)	
5, 69,9	)	
Deltast	)	Case No.
Debtor (s)	į	Chapter
	)	
	)	

### List of Creditors

1700 Kiefer Drive Suite 1 Zion, IL. 60099-5105	Synchrony Bank Po Box 72019-965022 orlando, FL.32896-5022
Capital one Po Box 6492 Carol Stream, IL.60197-6492	Prigressive leasing Po Box 413110 Salt lake City, UT. 184141-3110
49nger HOT 6250 Ridgewood Road 57. Cloud, MN.56303	Credit one Po Box 60500 City of Industry, CA. 91716-0500
23056 Network Place Chicago, IL. 60673-1230	Coilege of lake County 19351 W. washington St. Grayslake, IL. 6030
XF19749 PoBox Mo219 PhiladelPhia, PA. 619176- 0219	Navient Depart of Education Po Box 9135 Wilkes Baire, PA 18773